(Print Name of lobbyist)

## STATE OF NEW HAMPSHIRE

## 2017 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

PLEASE PRINT

RECEIVED

I. Name of Lobbyist(s) Daniel W. Allegretti  II. Name of lobbyist's partnership, firm or corporation, if any:			JAN 25 201	
			NEW HAMPSHI DEPARTMENT OF	
N/A				
(Name of partnership, firm or corporation				
111 Market Place Ba	altimore	Maryland	21202	
Business Address: (Street) (Tov	vn/City)	(State)	(Zip Code)	
(603) 224-9653		daniel.allegretti(	@exeloncorp.com	
(Telephone)	(Fax)			
III. This statement covers: (Choose one – file separ reportable expense transactions which are not attractions occurring in the month	ibutable to any or	ne client).		
Exelon Generation Company, LL				
(Full Name of Client as it appear <b>OR</b>	s on the Lobbyist Re	gistration Form)		
All reportable transactions by the lobbyist (includi unrelated to any particular client.	ng the lobbyist's fa	amily), or the lobbying fire	m listed below which are	
IV. Date of Report April 26, 2017  Reports cover: activity from date of registration to 3/3  October 25, 2017  activity from 7/1/17 to 9/30/17		July 26, 2017  y from 4/1/17 to 6/30/17  January 31, 2018  y from 10/1/17 to 12/31/17		
V. There have been no fees received and no re If this box is checked, complete just this form and sub Concord, NH 03301.	portable transa mit it to the Secret	ctions made since the l ary of State's Office, State	ast report.   House, Room 204,	
VI. Check if additional reports are attached:				
If you have received fees or made expenditures, y	ou must file Adde	ndum A- Fees and Exper	nses	
If you have paid an honorarium or reimbursed ex Expense Reimbursement				
If you, your firm, or your family has made politic	eal contributions, y	ou must file <b>Addendum (</b>	C-Political Contributions	
Sworn Statement/Affirmation by Lobbyist I have read RSA 15, RSA 15-B, RSA 14-C and RSA and complete to the best of my knowledge and belief.	664 and hereby sw	ear or affirm that the fore	going information is true	
Day (1) Calleda		1/18/2018		
(Signature of lobbyist)		1/18/ 7018 (Date)		
Daniel W. Allegretti				

# PLEASE PRINT

## STATE OF NEW HAMPSHIRE

# Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

I. Name of Lobbyist(s) Daniel W. Allegretti	
II. Name of lobbyist's partnership, firm or corporation, if any:	
N/A	
(Name of partnership, firm or corporation)	
III. Name of Client Exelon Generation Company, LLC	Date 1/18/2018
IV. Fees Received Indicate the gross amount of all fees received from the client identified above to lobbying, including fees for services such as public advocacy, government including research, monitoring legislation, and related legal work. The groreduced by any expenses:	relations, or public relations service
a) Total of all fees received in this reporting period	a) \$ 417.00
b) Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar year).	b) \$ 4,230.81
c) Total of all fees received to date (Add lines a and b)	c) \$ 4,647.81
d) Indicate the amount of any such fees that are due, but have not yet been paid	d) \$ <u>0.00</u>
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to repfees. Separate reports are to be filed for expenditures made relative to each of the lobbyist(s)/firm that are unrelated to any one client a separate report of Expenses are to be reported in one of three categories of expenses: (a) the during the reporting period for salaries, benefits, support staff, and office exindividual expenses where the expenditure was of \$25.00 or less (for example lunch where the cost was \$25.00 or less, purchase of a pen with a value of lebeing lobbied, purchase of a ceremonial object given to a person being lobbied (c) an itemized statement of each individual expenditure made during this report any purpose not covered by (a) (for example: purchase of a meal with value ceremonial object to be given to the subject of lobbying with a value greater restaurant expenses for a legislative reception). Expenses for honorariums contributions will be reported on separate addendums and should not be reported.	client and if expenditures are made being be filed for the lobbyist(s)/firm aggregate total of all expenses pair expenses; (b) the aggregate total of a le: meals purchased during a business than \$10 that is given to the person of with a value of \$25.00 or less); an orting period of greater than \$25.00 for the period of greater than \$25, purchase of the period of greater t
a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.	a) \$ 0.00
b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.	b) \$ 14.70
c) Total of all itemized expenditures reported in detail in section VI.	c) \$ 0.00

d) Total expenses for this reporting period (Add lines a, b and c)	d) \$
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	e) \$ 145.00
f) Total of all expenses year to date	f) \$ _159.70
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from leading period, including by whom paid or to whom charged.	obbying fees during this reporting
Paid to:	Amount:
N/A	\$
	\$
	\$
	\$
	\$
	\$
***************************************	
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm is true and complete to the best of my knowledge and belief.	n that the foregoing information
(Signature of lobbyist)	1/18/2018 (Date)
Daniel W. Allegretti	
(Print Name of lobbyist)	

## State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

Sworn Statement/Affirmation by Lobbyist

(Print Name of lobbyist)

Statement of Income and Expenses for:
Name of Lobbying partnership, firm, or corporation: Daniel W. Allegretti
Name of Client (leave blank if Statement is for the partnership, firm, or corporation and not related to any
particular client): Exelon Generation Company, LLC
Date of Report (check one):
April 26, 2017 □ July 26, 2017 □ October 25, 2017 □ January 31, 2018
I have read RSA 15, RSA 15-B, RSA 664, the Statement of Income and Expenses described above, and the following Addendums submitted with that Statement (insert the number of Addendum forms being submitted):
Addendum A(s).
O Addendum B(s).
O Addendum C(s).
I hereby swear or affirm that the foregoing information on the Statement and each Addendum is true and complete to the best of my knowledge and belief.
1/18/2018 (Date)
(Signature of lobbyist) (Date)
Daniel W. Allegretti